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7590

02/24/2004

Freudenberg & Associates  
 P.O. Box 841  
 Durango, CO 81302



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

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Kenton L. Freudenberg	(Depositor's name)
[Signature]	(Signature)
29 April 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/612,437	06/30/2003	Bret L. Howell		6517

TITLE OF INVENTION: KNEELING PAD WITH CANTILEVERED KNEECUP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	05/24/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PATEL, TAJASH D	3765	002-024000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Maxwell C. Freudenberg  
 2 Kenton L. Freudenberg  
 3

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

## 4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee
- ☐ Advance Order - # of Copies \_\_\_\_\_

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- ☒ A check in the amount of the fee(s) is enclosed.
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(Authorized Signature)

(Date)

29 April 2004

05/05/2004 MAHME2 00000016 10612437

01 FC:2501  
02 FC:1504665.00 OP  
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